FORM D



UNITED STATES
SECURITIES AND EXCHANGE CONMISSIONVED
Washington, D.C. 29549

APR 0 2 20

OMB APPROVAL
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SEC USE ONLY
Prefix Serial
DATE RECEIVED

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	,
Landmark Venture Capital, LLC	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4	(6) \square ULOE \square
Type of Filing: New Filing Amendment	1375661
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	•
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Landmark Venture Capital, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code	Telephone Number (Including Area Code)
136 East South Temple, Ste 2420, Salt Lake City, UT, 84111	(801) 230-9033
Address of Principal Business Operations (Number and Street, City, State, Zip Code (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Providing business capital in areas of real property, natural resources, precious commodi	ties, and business and market investments.
·	DDOCEOUED
Type of Business Organization	PROCESSED
	r (please specify):
business trust limited partnership, to be formed Limited L	iability Company APR. 1 1 2007
Month Year Actual or Estimated Date of Incorporation or Organization: 07 06 ✓ Actual E	stimated & THOMSON
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for St CN for Canada; FN for other foreign jurisdiction)	
Civion Canada, 11 for other foreign jurisdiction)	ושונים

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION ·

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

			ACIC IDENTI	FICATION DATA				1
		•	ASIC IDENTI	FICATION DATA			· · · · · · · · · · · · · · · · · · ·	
2. Enter the information re	-	_						
Each promoter of t	the issuer, if the iss	suer has been or	ganized within	the past five years;				
 Each beneficial ow 	ner having the pow	er to vote or disp	pose, or direct th	e vote or disposition	of, 10% or more	of a clas	s of equity securities of th	ie issuer.
 Each executive off 	ficer and director o	f corporate issue	ers and of corpo	orate general and ma	naging partners	of partne	ership issuers; and	
• Each general and r	nanaging partner o	f partnership iss	suers.	•				
CL In Brand and America		D 0	10	F	D:	- T-	C	
Check Box(es) that Apply:	✓ Promoter	■ Beneficia	ai Owner	Executive Officer	✓ Director	Ø	General and/or Managing Partner	
Full Name (Last name first, i	if individual)				•			
Cary Valerio					•			•
Business or Residence Addre 136 East South Temple,				4				
Check Box(es) that Apply:	✓ Promoter	Beneficia	al Owner	Executive Officer	Director	Ø	General and/or Managing Partner	
Full Name (Last name first, i	if individual)							
Chad Albury								
Business or Residence Addre	ss (Number and	Street City Str	ate Zin Code)					
136 East South Temple, S	•	. • .	, -					
Check Box(es) that Apply:				Executive Officer	Director		General and/or	
)	✓ Promoter	Beneficia			Director	V	Managing Partner	
Full Name (Last name first, i Mark Baca	if individual)							
Business or Residence Addre	ss (Number and	Street, City, Sta	ate, Zip Code)					
136 East South Temple,	Ste 2420, Salt La	ake City, UT,	84111	,				•
Check Box(es) that Apply:	Promoter	Beneficia	al Owner	Executive Officer	Director		General and/or Managing Partner	
Full Name (Last name first,	if individual)				,		·	
Business or Residence Addre	ess (Number and	Street, City, Sta	ate, Zip Code)			-		
Charle Bay(as) that Apply	Dramatas	□ Papatisi	al Ourras D	Evenutive Officer	☐ Director		Ganaral and/or	•
Check Box(es) that Apply:	Promoter	Бененск	al Owner	Executive Officer	☐ Director	Ц	General and/or Managing Partner	
Full Name (Last name first,	if individual)			•				
Business or Residence Addre	ess (Number and	Street, City, Sta	ate, Zip Code)					
Check Box(es) that Apply:	Promoter	☐ Beneficia	al Owner 🗆	Executive Officer	Director		General and/or	
t .		Bellenen	ar Owner .	Executive Officer		·.	Managing Partner	
Full Name (Last name first,	if individual)		•					
Business or Residence Addre	ess (Number and	Street, City, Str	ate, Zip Code)	· · · · · · · · · · · · · · · · · · ·				
Check Box(es) that Apply:	Promoter	Beneficia	al Owner	Executive Officer	Director		General and/or Managing Partner	
Full Name (Last name first,	if individual)							
Ruciness or Decidence Addr	acc (Mumhar and	Street, City, Sta	ate 7in Codal					
Business or Residence Addre	ee-	outer, City, Si	aic, Zip Coue)				•	
	(Use bla	nk sheet, or cop	y and use addit	ional copies of this s	sheet, as necessa	ry)		

, 7 ·				B. 1	NFORMAT	ION ABOU	T OFFERI	NG	, i	1.5		
. Has the	icense ant	d order t	na icenas i								Yes	No
. Has the	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								X			
What :	the mini-	num investn					_				ç 50.	00.00
. What is	s the minin	ium mvesm	ient mat w	viii de acce	pted from a	any individ	.uai /			****************	Yes	No
. Does th	ne offering	permit join	t ownershi	ip of a sing	le unit?						R	
commis If a pers or state a broke	ssion or sim son to be lis s, list the na er or dealer	tion request silar remune sted is an ass ame of the b , you may s	ration for s sociated pe roker or de et forth the	solicitation crson or age caler. If me	of purchase ent of a brok ore than five	ers in conne ker or deale e (5) persoi	ection with r registered is to be list	sales of seed with the Seed are asso	curities in t SEC and/or	he offering. with a state		
ull Name (Last name	first, if ind	ividual)									
lusiness or	Residence	Address (N	lumber and	d Street, C	ity, State, Z	Lip Code)				-		
lame of As	sociated B	roker or De	aler		•							
tates in W	hich Persor	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State:	s" or check	individual	l States)							☐ AI	l States
AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
full Name (Last name	first, if ind	ividual)									
Business of	r Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)				-		·
Vame of As	sociated B	roker or De	aler									
tates in W	hich Persor	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State:	s" or check	individual	States)						•••••	☐ Al	I States
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full Name (Last name	first, if ind	ividual)									
Business of	r Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Name of As	sociated B	roker or De	aler				•					
States in W	hich Persor	Listed Ha	Solicited	or Intends	to Solicit	Purchasers				•		
(Check	"All State:	s" or check	individual	States)							□ Al	1 States
AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Enter the aggregate offering price of securities included in this offering and the total ame sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange off	ering, check	
this box and indicate in the columns below the amounts of the securities offered for exalready exchanged.	xchange and	
	Aggregate	Amount Already
Type of Security	Offering Price	Sold
Debt	s <u>100,000,000.0</u>	1 <u>\$_4,300,000.00</u>
Equity		
Common Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify)	\$	\$
Total	<u>§ 100,000,000.0</u>	0(_{\$_4,300,000.00}
Answer also in Appendix, Column 3, if filing under ULOE.		
Enter the number of accredited and non-accredited investors who have purchased secu offering and the aggregate dollar amounts of their purchases. For offerings under Rule 5 the number of persons who have purchased securities and the aggregate dollar amo purchases on the total lines. Enter "0" if answer is "none" or "zero."	504, indicate ount of their Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors		\$ 2,600,000.00
Non-accredited Investors	<u>5</u>	\$_1,700,000:00
Total (for filings under Rule 504 only)		\$
If this filing is for an offering under Rule 504 or 505, enter the information requested for a sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months first sale of securities in this offering. Classify securities by type listed in Part C — C	prior to the	
Type of Offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$_0.00
a. Furnish a statement of all expenses in connection with the issuance and distrib securities in this offering. Exclude amounts relating solely to organization expenses of The information may be given as subject to future contingencies. If the amount of an expense is not known, furnish an estimate and check the box to the left of the estimate.	the insurer.	
Transfer Agent's Fees	· · · · · · · · · · · · · · · · · · ·	\$ 0.00
Printing and Engraving Costs		§ 0.00
Legal Fees		\$ 0.00
Accounting Fees		\$ 0.00
Engineering Fees	_	\$ 0.00
Sales Commissions (specify finders' fees separately)		\$ 0.00
Other Expenses (identify)		\$ 0.00
Total		\$_0.00

_	C. OFFERING PRICE, NU	MBER OF INVESTORS, EXPENSES AND U	SE OF PROCEEDS	
	b., Enter the difference between the aggregate of and total expenses furnished in response to Part C-proceeds to the issuer."	- Question 4.a. This difference is the "adjuste	ed gross	100,000,000.00
	Indicate below the amount of the adjusted gross peach of the purposes shown. If the amount for check the box to the left of the estimate. The total proceeds to the issuer set forth in response to P.	any purpose is not known, furnish an estim l of the payments listed must equal the adjuste	ate and	
			Payments to Officers, Directors, &	t Payments to
			Affiliates	Others
	Salaries and fees	•		
	Purchase of real estate			\$
	Purchase, rental or leasing and installation of mand equipment	nachinery	I71 ¢	[7] \$
	Construction or leasing of plant buildings and f			
	Acquisition of other businesses (including the			\
	offering that may be used in exchange for the assisted pursuant to a merger)	ssets or securities of another	C2/1 ¢	
	Repayment of indebtedness			
	Working capital			
			-	
	Other (specify):		<u>V</u> 3	— N 2
	1		 	Z]\$
	Column Totals			
	Total Payments Listed (column totals added)			10,000,000.00
		D. FEDERAL SIGNATURE	• • • • •	· ,
gı	e issuer has duly caused this notice to be signed by t nature constitutes an undertaking by the issuer to t information furnished by the issuer to any non-a	the undersigned duly authorized person. If th furnish to the U.S. Securities and Exchange (is notice is filed under l Commission, upon wri	
SI	uer (Print or Type)	Signature	Date	
.a	ndmark Venture Capital, LLC	6210	03/22/2007	
aı	me of Signer (Print or Type)	Title of Signer (Print or Type)		
	ad Albury	Managing Member		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E STATE SIGNATURE		2.3	•
CFR 230.262 presently subject to any of the disqualification	Yes	No K	

See Appendix, Column 5, for state response.

Is any party described in 17 provisions of such rule?

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

i		
Issuer (Print or Type)	Signature	Date
Landmark Venture Capital, LLC	SAFEE	03/22/2007
Name (Print or Type)	Title (Print or Tyre)	
Chad Albury	Managing Member	•.

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	APPENDIX											
1	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ification tte ULOE attach ation of granted) Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
AL		×							×			
AK												
AZ												
AR												
CA		×	-				,		x			
co												
СТ	I		-				·					
DE												
DC												
FL	<u> </u>								<u></u>]			
GA												
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ID ·	<u> </u>											
IL						,		<u> </u>				
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IA	<u> -</u>		,	,								
KS			·		,		,		<u> </u>			
KY.	<u> </u>	<u> </u>										
LA	<u> </u>						··					
ME	<u> </u>	<u> </u>			,							
MD	<u> </u>											
MA	 	<u> </u>										
MI	<u> </u>							<u> </u>				
MN		<u> </u>										
MS									<u></u>			

APPENDIX 2 3 5 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of amount purchased in State investors in State offered in state waiver granted) (Part C-Item 1) (Part C-Item 2) (Part B-Item 1) (Part E-Item 1) Number of Number of Non-Accredited Accredited State Yes No **Investors** Amount **Investors** Amount Yes No MO MT NE NV. NH NJ NM NY NC x × ND OH OK OR PA RI SCSD TN TX UT X × VTVAWA WV WI

. 1	K.J. C.	da da		APPI	ENDIX		Sec. 18							
1		2	3		4									
	to non-a	d to sell accredited rs in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					Type of investor and expla amount purchased in State waive			(if yes, explana	ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No					
WY		×							×					
PR									-					

END